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CONFIRMATION NO. 4261

<b>SERIAL NUMBER</b> 09/428,122	<b>FILING OR 371(c) DATE</b> 10/27/1999 <b>RULE</b>	<b>CLASS</b> <del>12</del> 536	<b>GROUP ART UNIT</b> 1645	<b>ATTORNEY DOCKET NO.</b> 19721-007-(P)	
<b>APPLICANTS</b> ANDREW D. MURDIN, ONTARIO, CANADA; RAYMOND P. OOMEN, ONTARIO, CANADA; PAMELA L. DUNN, ONTARIO, CANADA;					
<b>** CONTINUING DATA *****</b> This appin claims benefit of 60/106,070 10/29/1998 and claims benefit of 60/122,066 03/01/1999					
<b>** FOREIGN APPLICATIONS *****</b>					
<b>IF REQUIRED, FOREIGN FILING LICENSE GRANTED</b> <b>** 11/23/1999</b>					
Foreign Priority claimed <input type="checkbox"/> yes <input checked="" type="checkbox"/> no 35 USC 119 (a-d) conditions <input type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> Met after met <u>allowance</u> Verified and <u>lv</u> Acknowledged <u>Examiner's Signature</u> Initials		<b>STATE OR COUNTRY</b> CANADA	<b>SHEETS DRAWING</b> 19	<b>TOTAL CLAIMS</b> 37	<b>INDEPENDENT CLAIMS</b> 4
<b>ADDRESS</b> 30623					
<b>TITLE</b> CHLAMYDIA ANTIGENS AND CORRESPONDING DNA FRAGMENTS AND USES THEREOF					
<b>FILING FEE RECEIVED</b> 1480	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:		<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees ( Filing ) <input type="checkbox"/> 1.17 Fees ( Processing Ext. of time ) <input type="checkbox"/> 1.18 Fees ( Issue ) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit		

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